

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F49539

FILED  
Feb 27, 2003  
Secretary of State

Entity Name: NAVARRO DISCOUNT PHARMACIES NO. 2, INC.

**Current Principal Place of Business:**

3949 SW 8TH STREET  
MIAMI, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

5959 NW 37TH AVENUE  
MIAMI, FL 33142 US

**New Mailing Address:**

FEI Number: 59-2130901      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NAVARRO, MARCEL L  
5959 NW 37TH AVENUE  
MIAMI, FL 33142 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( )

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: NAVARRO, JOSE F,  
Address: 5959 NW 37TH AVENUE  
City-St-Zip: MIAMI, FL 00000, 33142

Title: VSTD ( ) Delete  
Name: NAVARRO, LUIS G.  
Address: 5959 NW 37TH AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: NAVARRO, JOSE F  
Address: 5959 NW 37TH AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: DVP (X) Change ( ) Addition  
Name: NAVARRO, LUIS G.  
Address: 5959 NW 37TH AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: DVPS ( ) Change (X) Addition  
Name: NAVARRO, MARCEL L DVPST  
Address: 5959 NW 37TH AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: DVP ( ) Change (X) Addition  
Name: NAVARRO, GABRIEL L  
Address: 5959 NW 37TH AVENUE  
City-St-Zip: MIAMI, FL 33142

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARCEL NAVARRO

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

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02/27/2003

\_\_\_\_\_  
Date